State of California Office of Administrative Law

In re:

Department of Food and Agriculture

Regulatory Action:

Title 03, California Code of Regulations

Adopt sections:

Amend section: 3435(b)

Repeal sections:

NOTICE OF APPROVAL OF CERTIFICATE OF COMPLIANCE

Government Code Sections 11349.1 and 11349.6(d)

OAL Matter Number: 2015-1103-03C

OAL Matter Type: Certificate of Compliance

This Certificate of Compliance by the Department of Food and Agriculture (the "Department") makes permanent the prior emergency rulemaking action (OAL File No. 2015-0505-04E) that expanded the quarantine area for the Asian Citrus Psyllid ("ACP") Diaphorina citri by approximately 63 square miles in the Bakersfield area of Kern County. This amendment provides authority for the state to perform quarantine activities against ACP within this additional area.

OAL approves this regulatory action pursuant to section 11349.6(d) of the Government Code.

Date:

December 16, 2015

For:

DEBRA M. CORNEZ

Director

Attorney

Copy:

Original: Karen Ross Sara Khalid

| STATE OF CALIFORNIA-OFFICE OF ADMINISTRATIVE LAW NOTICE PUBLICATION/REGULATION | |
|---|--|
| STD. 400 (REV. 01-2013) | |

TYPED NAME AND TIME OF SIGNATORY
Nick Condos, Director, Plant Health and Pest Prevention Services

For use by Secretary of State only

| STD. 400 (REV. 01-2013) | · · · · · · · · · · · · · · · · · · · | | | | | | |
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| OAL FILE NOTICE FILE NUMBER Z-2015-0616-04 REGULATORY ACTION NUMBER Z015-1103-03C EMERGENCY NUMBER | | | | | | | |
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| For use by Office of Admin | | | 1 2015 NOV -3 P 12: 0: | | | of the State of California | |
| | | | OFFICE OF ADMINISTRATIVE LAW | | | DEC 1.6 2015 | |
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| | | | | | | 2:08 Pm | |
| NOTICE | NOTICE | | | TOW ATIONS | | | |
| AGENCY WITH RULEMAKING AUTHORITY | | | | REGULATIONS | | AGENCY FILE NUMBER (If any) | |
| Department of Food and Ac | griculture | | | | | | |
| A. PUBLICATION OF NOTIC | CE (Comple | ete for publica | tion in Notice R | eaister) | | | |
| 1. SUBJECT OF NOTICE | - | TITL | | FIRST SECTION AFFI | ECTED | 2. REQUESTED PUBLICATION DATE | |
| | | | | | | | |
| 3. NOTICE TYPE Notice re Proposed Regulatory Action Othe | er | 4. AGENCY CONTACT | PERSON | TELEPHONE NUMBER | | FAX NUMBER (Optional) | |
| OAL USE ACTION ON PROPOSED Approved as Submitted | NOTICE Approve | ed as | Disapproved/ | NOTICE REGISTER N | | PUBLICATION DATE | |
| Submitted | Modified | | Withdrawn | | 26·Z | 6/26/2015 | |
| B. SUBMISSION OF REGUL | ATIONS (Co | mplete when | submitting reg | ulations) | | | |
| 1a. SUBJECT OF REGULATION(S) | | | | 1b. ALL PREVI | OUS RELATED O | AL REGULATORY ACTION NUMBER(S) | |
| Asian Citrus Psyllid Interior Q | | | | 2015-0505- | -04E | | |
| 2. SPECIFY CALIFORNIA CODE OF REGULATIONS | TITLE(S) AND SECTI | ON(S) (Including title 26 | , if toxics related) | | | | |
| SECTION(S) AFFECTED (List all section number(s) | ADOFT | | | | | | |
| individually. Attach | AMEND | | | | | | |
| additional sheet if needed.) | 3435(b) | | | | | | |
| TITLE(S) | REPEAL | | | | | | |
| 3. TYPE OF FILING | | · . | | | | | |
| Regular Rulemaking (Gov. | X Certificate | of Compliance: The ago | ency officer named | Fmergency Reador | at (Gov | | |
| Code §11346) Resubmittal of disapproved or withdrawn nonemergency filing (Gov. Code §§11349.3, | below certifies that this agency complied with the provisions of Gov. Code §§11346.2-11347.3 either before the emergency regulation was adopted or | | | | | Changes Without Regulatory Effect (Cal. Code Regs., title 1, \$100) | |
| 11349,4) | within the time period required by statute. File & Print Print Only | | | | | | |
| Emergency (Gov. Code, §11346.1(b)) | | filing (Gov. Code, §11 | | Other (Specify) | | | |
| 4. ALL BEGINNING AND ENDING DATES OF AVAI | LABILITY OF MODIFI | ED REGULATIONS AND/O | R MATERIAL ADDED TO THE | RULEMAKING FILE (Cal. Code | Regs. title 1, §44 a | nd Gov. Code §11347.1) | |
| EFFECTIVE DATE OF CHANGES (Gov. Code, §§ Effective January 1, April 1, July 1, or | | Cal. Code Regs., title 1, §1 | 00) §100 Changes With | out Effective | | increase of the second of the | |
| October 1 (Gov. Code §11343.4(a)) CHECK IF THESE REGULATIONS REQU | △ Se | cretary of State | Regulatory Effect | other (Specif | fy) | | |
| Department of Finance (Form STD. 3 | | A REVIEW, CONSULT. | | ONCURRENCE BY, ANOT tices Commission | HER AGENCY OF | R ENTITY State Fire Marshal | |
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| Other (Specify) CONTACT PERSON | | l TELE | PHONE NUMBER | | | | |
| Sara Khalid | | 1 | 6-403-6625 | FAX NUMBER (| ' ' | E-MAIL ADDRESS (Optional) Sara.Khalid@cdfa.ca.gov | |
| I certify that the attacher of the regulation(s) iden is true and correct, and t or a designee of the head | tified on this hat I am the | form, that the i head of the age | nformation speci ncy taking this ac | fied on this form | For use by | Office of Administrative Law (OAL) only DORSED APPROVED | |
| SIGNATURE OF AGENCY HEAD OF DESIG | | -y/ wird dell dutf | DATE | 9.15 | | DEC 1 6 2015 | |
| TYPED NAME AND TITLE OF SIGNATORY | la alel i la | | | V 1 U | | U LU !U | |

Office of Administrative Law